## INSTRUCTION SHEET FOR ENDURING POWER OF ATTORNEY

Please print off, complete and return this document to us by email or post and we will contact you with a quote and to discuss further.

1. DONOR	R (Person granting Power of Attorney)
Name:	
Full Residentia	l
Address:	
Occupation:	Date of Birth
Telephone No:	(H)(W)
Mobile No.	
Email Address	
2. ATTOR	NEY (Person exercising Power of Attorney) – List those you wish to appoint
Name:	
Full Residentia	l
Address:	
Occupation:	Date of Birth
Telephone No:	(H)(W)
Mobile No.	
Email Address	
3. ATTOR	NEY (if you require more than one attorney)
Name:	
Full Residentia	l
Address:	
Occupation:	Date of Birth
Telephone No:	(H) (W)
Mobile No.	
Email Address	

4.	take their place for exampl	unable or unwilling to act would you like someone else to e, you may initially appoint your spouse as your attorney willing to act then your son/daughter.)
	SUBSTITUTE ATTORNEY	
Name		
Full Residential		
Addre	s:	
Occup	ition:	Date of Birth
Telephone No:(H) (W)		
Mobile	No	
Email	ddress:	
Name		
Full R	sidential	
Addre	s:	
Occup	ition:	Date of Birth
Telepl	one No:(H)	(W)
Mobile	No	
Email	ddress:	

## 5. ACTS OF ATTORNEYS

If more than on	e Attorney – how shal	I they make their decision?
	All sign-jointly (unanimous decision)	
	Any one sign- severally (anyone may decide)	
	Jointly and Severally	

## 6. RESTRICTION ON YOUR POWER OF ATTORNEY (only complete after discussion with your professional adviser).

This section need not be completed if you wish to give your Attorney unlimited power to deal with your property. However, it is possible to restrict your Attorney's actions to specified pieces of property or actions on specified bank accounts or dealings with certain shares. If this is the case, please provide details below (for example, my Attorney is only permitted to sell my house situated a 2 Bigg Street, Mansfield).
CONFLICT OF INTEREST
This is an authorisation for your attorney to enter into a transaction on your behalf even if his/her interests and duty in relation to the transaction conflict (i.e. if the husband and wife own property jointly, the wife is incapacitated and the husband needs to sell her share in the property to pay for medical expenses but wants to purchase her share - he has a conflict of interest) - inclusion of this clause authorises him to proceed even if there is a conflict. We strongly recommend that you incorporate such authorisation otherwise it may be necessary for your Attorney to obtain a QCAT order to proceed.
Yes
No 🗆
NOTES TO SOLICITOR

7.

8.

If you would like to seek clarification on a particular issue or wish to seek any advice before completing this Instruction sheet please contact **Noel Duffy** direct on:

Business: 07 5510 4828 or 02 9293 2511

Mobile: 0422 994 151

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Website: www.duffylaw.com.au